

Patent
Customer No.: 006980
Docket No.: BROOK5

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of)	
)	Int'l App No.: PCT/NL2004/000565
Jacob Korf)	
)	Int'l Filing Date: 11 August 2004
Serial No.: 10/571,873)	
)	
Filed: 15 March 2006)	
)	
For: WOUND DRAINAGE DEVICE)	

SUBMISSION OF EXECUTED DECLARATION AND POWER OF ATTORNEY

Mail Stop PCT
Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Atlanta, GA 30308-2216
24 July 2006

Sir:

The above-listed patent application was filed with an unsigned *Declaration and Power of Attorney* on 15 March 2006 by the office of Melvin I. Stoltz, Esq. The case has since been transferred to a new firm for prosecution.

In anticipation of receiving a *Notification Of Missing Requirements*, but it being sent to prior counsel, Applicant respectfully submits a fully executed *Declaration and Power of Attorney* document, appointing Troutman Sanders LLP as attorney or agent to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

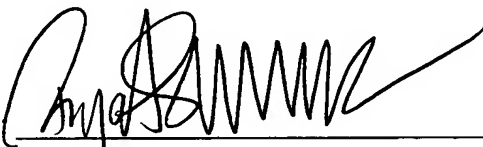
The fee for submission of the executed *Declaration and Power of Attorney* was prepaid by prior counsel upon patent application filing. However, the Commissioner is hereby authorized to charge any additional fees that may be required to Deposit Account No. 20-1507.

Thus, all further correspondence in this case, including a *Notification Of Missing Requirements* if it still must issue, or the *Notice of Acceptance*, should be forwarded to new counsel, Troutman Sanders LLP.

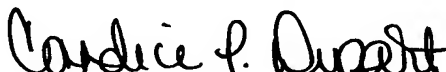
Further, Applicant respectfully requests the docket number of this Application be changed from 43-025 to BROOK5. As the prosecution of this Application has been transferred to a new law firm, its docketing procedures would benefit with this new docket number.

Respectfully submitted,

TROUTMAN SANDERS, LLP

By 
Ryan A. Schneider

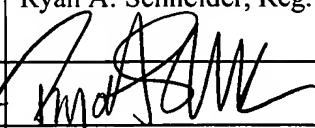
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, on 24 July 2006.

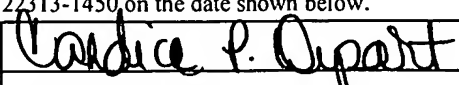

Candice P. Dyart

TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/571,873
		Filing Date	03/15/2006
		First Named Inventor	Jacob Korf
		Art Unit	****
		Examiner Name	****
Total Number of Pages in This Submission	5	Attorney Docket Number	BROOK5

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <i>Submission of Executed Declaration & Power of Attorney Document; Combined Declaration for Patent Application & Power of Attorney; Return Postcard</i>

<input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks:
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Troutman Sanders, LLP Ryan A. Schneider, Reg. No.: 45,083
Signature	
Date	24 July 2006

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.		
Signature		
Typed or printed name	Candice P. Dysart	Date 7/24/06